DEPARTMENT OF WORKFORCE DEVELOPMENT

Secretary Roberta Gassman 201 East Washington Avenue P.O. Box 7946 Madison, WI 53707-7946 Telephone: (608) 266-7552 FAX: (608) 266-1784 www.dwd.state.wi.us



State of Wisconsin Governor Jim Doyle

DEPARTMENT OF HEALTH AND FAMILY SERVICES

Secretary Helene Nelson 1 West Wilson Street P.O. Box 7850 Madison, WI 53707-7850 Telephone: (608) 266-9622 FAX: (608) 266-7882 www.dhfs.wisconsin.gov

TO: Economic Support Supervisors

Economic Support Lead Workers

Training Staff

Child Care Coordinators

W-2 Agencies

Workforce Development Boards Job Center Leads and Managers

FROM: Amy Mendel-Clemens

Technical Assistance, Training & Education

Section

Bureau of Eligibility Management Division of Health Care Financing

BEM/DWS OPERATIONS MEMO					
No:	05-10				
DATE	: 02/25	/2005			
FS CTS FSET JAL WIA		MA CC EA JC Other		SC W-2 CF RAP □*	
PRIOF	RITY: I	HIGH			

SUBJECT: 2005 Federal Poverty Level Changes

CROSS REFERENCE: MEH 4.8.4, 5.16.7, 5.16.8, 5.16.9, 8.1.6

EFFECTIVE DATE: See specific dates below.

PURPOSE

This memo provides local agencies with the 2005 Income Guidelines for Medicaid (MA) Programs. Below, are the updated tables, effective dates and cross references for these programs.

BACKGROUND

The U.S. Department of Health and Human Services (DHHS) has published its annual update of the Poverty Income Guidelines (a.k.a., Federal Poverty Level, or FPL) in the Federal Register. These FPL guidelines are available at the following website:

http://aspe.dhhs.gov/poverty/index.shtml. Income limits and other amounts used in eligibility determinations for some categories of Medicaid (MA) are based upon the FPL. The increase in the federal FPL will result in changes to the MA income limits as specified in this Operations Memo.

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POLICY

Income limits and other amounts based upon the FPL will be effective on the dates provided below. The changes will be included in the next Medicaid Eligibility Handbook (MEH) release. When ongoing cases are updated in CARES with the new income limits, the first affected benefit month will be April 1, 2005. As you become aware of cases that could have benefited from the higher limits in March, re-determine eligibility with the 2005 FPL limits listed below.

Medicare Buy-In categories and MAPP implement the 2005 FPL income limits on January 1, 2005. DHHS publishes the new FPL income limits after January 1 (usually late February). To prevent cases from closing before the higher FPL limits are published by DHHS and updated in CARES, the COLA increases that appear with the January checks are disregarded.

NOTE ≫

To comply with Federal and State law the Spousal Impoverishment Community Spouse Income Allowance minimum allocation, Shelter Base Amount, and Spousal Impoverishment Family Member Income Allowance will not be effective until July 1, 2005.

CARES

CARES eligibility re-determinations will occur as part of the annual FPL mass change on the weekend of March 5, 2005, affecting the April benefit month. CARES tables TMEP, TBCS, TFPL, and TMST were updated February 25, 2005 immediately affecting eligibility for March forward. Any applications run after February 25, 2005 and any ongoing cases run with March dates will have eligibility determined using the 2005 FPL limits.

MEDICARE BUY-INS, MEDICAID PURCHASE PLAN (MAPP) & COLA DISREGARD

Ongoing Cases

In December 2004, the CARES COLA mass change stored the COLA increase on AFUI as "CURRENT DISREGARD". For cases run between January 1, 2005 and February 25, 2005, CARES subtracted the COLA increase from the client's income before comparing it to the eligibility income limits. In addition, CARES subtracted the "CURRENT DISREGARD" from the client's income before comparing it to the income limits for MAPP premiums.

Eligibility determinations run in CARES for March 2005 through December 2005 (after February 25th) EDBC will not subtract the COLA increase from total income when determining eligibility.

New Applications

New applications processed between January 1, 2005 and February 25, 2005 for Medicare Buy-In categories and MAPP should have had the 2005 COLA amount manually entered in the "Current Disregard" on AFUI. If entered, CARES subtracted the "Current Disregard" from an applicant's/recipient's income when determining eligibility for benefits and MAPP premium. For applications processed between January 1,2005 and February 25, 2005 that did not have the "CURRENT DISREGARD" manually entered on AFUI and were denied for excess income, redetermine eligibility with the new 2005 FPL's upon the client's request.

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<u>SPOUSAL IMPOVERISHMENT AND COMMUNITY SPOUSE INCOME ALLOWANCE</u> AND SPOUSAL IMPOVERISHMENT FAMILY MEMBER INCOME ALLOWANCE.

Changes to the Spousal Impoverishment Community Spouse Income Allowance minimum allocation, Shelter Base Amount, and Spousal Impoverishment Family Member Income Allowance will be effective July 1, 2005. A separate Operations Memo will be issued in May 2005 with these changed amounts. This memo will also describe the mass change planned to affect July benefits.

QUALIFIED MEDICARE BENEFICIARY (QMB)

Effective: 01/01/2005 Cross Reference: MEH 8.1.6

Group Size	OLD Limit (100%)	NEW Limit (100%)	
1	\$ 775.83	\$797.50	
2	\$ 1,040.83	\$1,069.17	

QUALIFIED DISABLED & WORKING INDIVIDUAL (QDWI)

Effective: 01/01/2005 Cross Reference: MEH 8.1.6

Group Size	OLD Limit(200%)	NEW Limit(200%)
1	\$1,551.67	\$1,595.00
2	\$2,081.67	\$2,138.33

QDWI eligibility is determined in CARES.

SPECIFIED LOW-INCOME MEDICARE BENEFICIARY (SLMB)

Effective: 01/01/2005 Cross Reference: MEH 8.1.6

Group Size	OLD Limit(120%)	NEW Limit(120%)
1	\$931.00	\$957.00
2	\$1249.00	\$1,283.00

SPECIFIED LOW-INCOME MEDICARE BENEFICIARY PLUS (SLMB +)

Effective: 01/01/2005 Cross Reference: MEH 8.1.6

Group Size	OLD Limit(135%)	NEW Limit(135%)
1	\$1,047.38	\$1,076.63
2	\$1,405.13	\$1,443.38

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MAPP

Effective: 01/01/2005 Cross Reference: MEH 8.1.6

Income limits for MAPP are based on 250% of the FPL for applicants and recipients. Individuals above 150% of FPL may need to pay a premium in order to participate in the MAPP program.

Group	OLD Limit	NEW Limit	OLD MAPP Cutoff	NEW MAPP Cutoff
Group Size	OLD LIIIII	INEVV LIIIIII	Premium Payment	Premium Payment
5.25	(250%)	(250%)	(150%)	(150%)
1	\$1,939.58	\$1,993.75	\$1,163.75	\$1,196.25
2	\$2,602.08	\$2,672.92	\$1,561.25	\$1,603.75
3	\$3,264.58	\$3,352.08	\$1,958.75	\$2,011.25
4	\$3,927.08	\$4,031.25	\$2,356.25	\$2,418.75
5	\$4,589.58	\$4,710.42	\$2,753.75	\$2,826.25
6	\$5,252.08	\$5,389.58	\$3,151.25	\$3,233.75
7	\$5,914.58	\$6,068.75	\$3,548.75	\$3,641.25
8	\$6,577.08	\$6,747.92	\$3,946.25	\$4,048.75
9	\$7,239.58	\$7,427.08	\$4,343.75	\$4,456.25
10	\$7,902.08	\$8,106.25	\$4,741.25	\$4,863.75
For each additional person	+ \$ 662.50	+ \$679.17	+ \$397.50	+ \$407.50

OBRA CHILDREN (AT LEAST 6 BUT NOT 19 YEARS OLD)

Effective: 3/01/2005 Cross Reference: MEH 8.1.6

Group	OLD Limit	NEW Limit	Group	OLD Limit	NEW Limit
Size	(100%)	(100%)	Size	(100%)	(100%)
1	\$ 775.83	\$797.50	6	\$2,100.83	\$2,155.83
2	\$1,040.83	\$1,069.17	7	\$2,365.83	\$2,427.50
3	\$1,305.83	\$1,340.83	8	\$2,630.83	\$2,699.17
4	\$1,570.83	\$1,612.50	9	\$2,895.83	\$2,970.83
5	\$1,835.83	\$1,884.17	10	\$3,160.83	\$3,242.50
			for each		
			person	+ \$265.00	\$271.67
			over 10		

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HEALTHY START (HS) AND HEALTHY START PRESUMPTIVE ELIGIBILITY (PE) (<6 and Pregnant women)

Effective: 03/01/2005 Cross Reference: (HS) MEH 8.1.6

-Group	OLD Limit	NEW Limit	Group	OLD Limit	NEW Limit
Size	HS/PE	HS/PE	Size	HS/PE	HS/PE
0.20	CAT NDY	CAT NDY		CAT NDY	CAT NDY
	(133%)	(133%)		(133%)	(133%)
1	\$1,031.86	\$1,060.68	6	\$2,794.11	\$2,867.26
2	\$1,384.31	\$1,421.99	7	\$3,146.56	\$3,228.58
3	\$1,736.76	\$1,783.31	8	\$3,499.01	\$3,589.89
4	\$2,089.21	\$2,144.63	9	\$3,851.46	\$3,951.21
5	\$2,441.66	\$2,505.94	10	\$4,203.91	\$4,312.53
			each person over 10	+ \$ 352.45	\$361.32

Group Size	OLD Limit HS/PE MED NDY (185%)	NEW Limit HS/PE MED NDY (185%)	Group Size	OLD Limit HS/PE MED NDY (185%)	NEW Limit HS/PE MED NDY (185%)
1	\$ 1,435.29	\$1,475.38	6	\$3,886.54	\$3,988.29
2	\$1,925.54	\$1,977.96	7	\$4,376.79	\$4,490.88
3	\$ 2,415.79	\$2,480.54	8	\$4,867.04	\$4,993.46
4	\$ 2,906.04	\$2,983.13	9	\$5,357.29	\$5,496.04
5	\$ 3,396.29	\$3,485.71	10	\$5,847.54	\$5,998.63
			each person over 10	+ \$ 490.25	\$502.58

FAMILY PLANNING WAIVER (FPW) AND FPW PRESUMPTIVE ELIGIBILITY (PE)

Effective: 03/01/2005

Cross Reference: (FPW) MEH 8.1.6

Group Size	OLD Limit FPW/FPW PE (185%)	NEW Limit FPW/FPW PE (185%)	Group Size	OLD Limit FPW/FPW PE (185%)	NEW Limit FPW/FPW PE (185%)
1	\$1,435.29	\$1,475.38	6	\$3,886.54	\$3,988.29
2	\$1,925.54	\$1,977.96	7	\$4,376.79	\$4,490.88
3	\$2,415.79	\$2,480.54	8	\$4,867.04	\$4,993.46
4	\$2,906.04	\$2,983.13	9	\$5,357.29	\$5,496.04
5	\$3,396.29	\$3,485.71	10	\$5,847.54	\$5,998.63
			each person over 10	+ \$ 490.25	+ \$502.58

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BADGERCARE

Effective: 03/01/2005 Cross Reference: MEH 8.1.6

Income limits for BadgerCare are based on 185% of the FPL for applicants and 200% of the FPL for recipients. Families above 150% of FPL will need to pay a premium in order to participate in the BadgerCare program.

Group Size	OLD Limit Applicants (185%)	NEW Limit Applicants (185%)	OLD Limit Recipients (200%)	NEW Limit Recipients (200%)
1	\$ 1,435.29	\$1,475.38	\$1,551.67	\$1,595.00
2	\$1,925.54	\$1,977.96	\$2,081.67	\$2,138.33
3	\$2,415.79	\$2,480.54	\$2,611.67	\$2,681.67
4	\$2,906.04	\$2,983.13	\$3,141.67	\$3,225.00
5	\$3,396.29	\$3,485.71	\$3,671.67	\$3,768.33
6	\$3,886.54	\$3,988.29	\$4,201.67	\$4,311.67
7	\$4,376.79	\$4,490.88	\$4,731.67	\$4,855.00
8	\$4,867.04	\$4,993.46	\$5,261.67	\$5,398.33
9	\$5,357.29	\$5,496.04	\$5,791.67	\$5,941.67
10	\$5,847.54	\$5,998.63	\$6,321.67	\$6,485.00
For each additional person	+ \$ 490.25	+ \$502.58	+ \$ 530.00	+ \$543.33

CARES uses tables for 100% of FPL in BadgerCare processing to send a 'GP' medical status for those under 100% FPL and a "B4" medical status for those falling between 100% and 150% of FPL.

Group Size	OLD Cutoff 'GP' Med Stat (100%)	NEW Cutoff 'GP' Med Stat (100%)	OLD Cutoff Premium Payment (150%)	NEW Cutoff Premium Payment (150%)
1	\$ 775.83	\$797.50	\$1,163.75	\$1,196.25
2	\$1,040.83	\$1,069.17	\$1,561.25	\$1,603.75
3	\$1,305.83	\$1,340.83	\$1,958.75	\$2,011.25
4	\$1,570.83	\$1,612.50	\$2,356.25	\$2,418.75
5	\$1,835.83	\$1,884.17	\$2,753.75	\$2,826.25
6	\$2,100.83	\$2,155.83	\$3,151.25	\$3,233.75
7	\$2,365.83	\$2,427.50	\$3,548.75	\$3,641.25
8	\$2,630.83	\$2,699.17	\$3,946.25	\$4,048.75
9	\$2,895.83	\$2,970.83	\$4,343.75	\$4,456.25
10	\$3,160.83	\$3,242.50	\$4,741.25	\$4,863.75
For each additional person	+ \$265.00	+ \$271.67	+ \$ 397.50	+ \$407.50

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SENIORCARE

Effective: 03/01/2005 Cross Reference: MEH 5.16.7

Level 1 at or below 160% of FPL

Group Size	OLD at or below 160%	NEW at or below 160%
1	\$14,896 or lower	\$15,312 or lower
2	\$19,984 or lower	\$20,528 or lower

Level 2a above 160% and at to or below 200% FPL

Croup	OLD	NEW
Group Size	above 160% - and at or below	above 160% - and at or below 200% of
Size	200% of FPL	FPL
1	\$14,897 to \$18,620	\$15,313 to \$19,140
2	\$19,985 to \$24,980	\$20,529 to \$25,660

Level 2b Income above 200% - and at or below 240% of FPL

Group Size	OLD above 200% - and at or below 240% of FPL	NEW above 200% - and at or below 240% of FPL
1	\$18,621 to \$22,344	\$19,141 to \$22,968
2	\$24,981 to \$29,976	\$25,661 to \$30,792

Level 3 Annual income is above 240% of the FPL

Group	OLD	New
Size	above 240% of the FPL	above 240% of the FPL
1	\$22,345 or greater	\$22,969 or greater
2	\$29,977 or greater	\$30,793 or greater

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CONTACTS

BEM CARES Information & Problem Resolution Center

★Program Categories – FS – Food Stamps, MA – Medicaid, SC – Senior Care, CTS – Caretaker Supplement, CC – Child Care, W-2 – Wisconsin Works, FSET – Food Stamp Employment and Training, CF – Children First, EA – Emergency Assistance, JAL – Job Access Loan, JC - Job Center Programs, RAP – Refugee Assistance Program, WtW – Welfare to Work, WIA – Workforce Investment Act, Other EP – Other Employment Programs.

DHFS/DHCF/BEM/JDL